

**N.H. EMERGENCY MEDICAL & TRAUMA SERVICES  
COORDINATING BOARD**

**Richard M. Flynn Fire Academy – Concord, NH**

**"APPROVED MINUTES"**

**January 15, 2004**

**Members Present:** Dave Duquette, Fred Heinrich, David Hogan, Janet Houston, Director Rick Mason, Dr. Joe Mastromarino, Dr. Doug McVicar, Shawn Mitchell, Jackie Normile, Chief Sue Prentiss, Dianne Roberts, Dr. Joe Sabato, Dr. Clare Wilmot

**Members Absent:** Steve Achilles Eileen Bartlett, Paul Gamache, Stephen Grise, Julie Lastowka, Karen Lord, Susan Reeves, Dr. John Sutton, Dr. Norm Yanofsky.

**Guests:** Dr. Tom Andrew, Donna York Clark, Dave Dubey, Jeanne Erickson

**Bureau Staff:** Wanda Botticello, Executive Secretary, Liza Burrill, Educational Coordinator; John Clark, ALS Coordinator, Kathy Doolan, Field Services Coordinator, Bill Wood, Preparedness Coordinator

**CALL TO ORDER**

**Item 1.** The meeting of the EMS & Trauma Services Coordinating Board was called to order by Dr. Joe Sabato, Chair at 1:30 PM on January 15, 2004, at Richard M. Flynn Fire Academy, Concord, New Hampshire.

Membership Introduced.

**II. ACCEPTANCE OF MINUTES (1:40 PM)**

**Item 1.** **November 20, 2003 Minutes:**

**Motion** was made by C. Wilmot and seconded by J. Mastromarino to accept the minutes as written – no additions/deletions or corrections. Motion passed unanimously.

**III. DISCUSSION ITEMS**

**Item 1.** – **Medical Examiners Shared Interest with EMS**

The Chair introduced Dr. Tom Andrew from the New Hampshire State Medical Examiner's (ME) Office. Dr. Andrew wanted to meet the board so as to put a face on the ME's office and gave an overview of the Office's responsibilities. Examining the causes of death but more so public health than law enforcement. The public health focus is where the broadest intersection with EMS takes place. Data collection and sharing with EMS is useful to both areas. Several areas already exist: Pediatric deaths and Teen suicides. The ME's

Office is pleased to assist EMS and share info as requested. The floor was opened to questions

Dr. Sabato asked about an annual report for the ME's Office. Dr. Andrew stated that no report currently exist but that a push to centralize data collection is underway. Dr. Wilmot asked the number of autopsies completed in a year to which the response was 3 – 400 but should be completing more like 500 but the cost is prohibitive (avg. \$2000).

D. Duquette asked if funds are available to investigate line of duty deaths. Dr. Andrew advised that they are set up to meet those criteria, and do them well.

### **Item 2. - N.H. EMS Medical Control Board (MCB) Report**

Dr. Joe Mastromarino reported for the MCB a summary of the morning meeting (01/15/04). Topics included discussion on the ACEP meeting 1/30 and their web site, the EMS Medical Directors roundtable and dinner meeting 12/03, E-911 report that they have hired Bill Finch to handle EMD call reviews, the fast track approach to modifying the EMS rules to allow for protocol development has been withdrawn from legislation process – will need to depend on the JLCAR process, an overview of the Protocol Content Review Committee work, Interfacility Transfer guidelines and a proposal to add Levalbuterol to the approved drug list. **(Please refer to the January 15, 2004, MCB Minutes for more detailed information).**

### **Item 3. – NH Bureau of EMS Report**

Chief Prentiss welcomed and thanked everyone for coming. The following are the highlights from the Bureau Chief's written report (in packets):

- **As of December 2003:**
  - Number of Licensed Providers currently – 4511
  - Number of Licensed EMS Units currently – 300
  - Number of Licensed EMS Instructor/Coordinators – 119
  - Number of First Responders – 348 (plus 28 Apprentices)
  - Number of EMT- Basics – 107 (NH) and 2316 (NR)
    - EMT – Intermediates – 1040
    - EMT – Paramedics - 672
- **Re-Organization of the Bureau of EMS** – John Clark, JD, NREMT-P, FP-C will be taking over the ALS Coordinators position since Will Owen's resignation. W. Owen will continue to work as a part time employee of the Bureau while he continues his schooling.

Jackie Stocking, RN, MSN, EMT-P will be replacing John Clark as the part time Trauma Care Documentation Coordinator and will be based in the Concord Office.

Mark Beliveau, FF/EMT, is the new grant funded AED Coordinator and will be working out of the Lebanon Office.

- **Fire and Emergency Services Instructor Training** – Both fall programs have been completed and those who attended are now moving into the preceptorship phase. The first round of reciprocity candidates (between Fire & EMS) is complete and the experienced Educator “challenge” presentations and written exams are underway. An Additional field based Instructor program will be held in the Seacoast area, late winter – early spring 2004.
- **Protocol Development and Implementation** –The committee met for a third time in January and will continue to meet on the first Friday of each month from 10 AM – 2 PM, until the project is complete. John Clark and Dr. Albertson will be the leaders for this project although Will Owen is still involved. For further information on this project – see the Bureau web site <http://www.state.nh.us/safety/ems>.
- **Trauma System & Preparedness:** The Trauma Medical Review committee has been working with the Bureau to develop a “renewal of assignment” process for the hospitals presently active in the system. The final document will be presented in February and come before the EMS & Trauma Services Coordinating Board in March.

The Flu and Meningitis have become public health concerns in New Hampshire over the past few months. Front line EMS Providers play an important role in the identification of possible cases. See the Preparedness section of the Bureau’s web site for updates - all clinical recommendations are reviewed by the State’s Epidemiologist.

- **Uniform Statewide Exam Process:** A final draft of the proposal is due shortly. No major scheduling or operational changes will happen until this process is finalized and approved.
- **Radio Interoperability:** All five Regional Councils will have an opportunity to view Major Booths presentation on the Interoperability project. In order to address the hospital’s concerns about their radio’s, Major Booth will meet with representatives from the Hospital Association’s Preparedness Committee.

A follow-up survey will be distributed to all EMS and Fire Agencies in order to help plan installation methods. Existing vendors that already work with the communities will be contracted to complete the work. It is important for all Fire and EMS agencies to complete the surveys in order to complete this project efficiently.

- **Rural AED 2003** –. The federal granting agency officially re-obligated the funding for the Rural AED program. A part-time AED Coordinator’s position has been created and filled, the North Country Health Consortium contract process is underway, the AED bid has been prepared and sent. The Research section is preparing data on cardiac arrests, cardio-vascular emergencies and response times and

the information will be sent to the EMS Regional Councils for planning purposes.

- **Re-Registration season:** The Refresher Training Program (RTP) and Practical Exam season is well underway, and the Education Section is very busy! National Registry has a new format for reporting training and continuing education for the re-registering EMT-Intermediate (EMT-I's) which has been confusing for some. An advisory was created by the Bureau to offer instructions on how to complete the requirements and the paperwork. This advisory was sent to all EMT-I's who lapse in March of 2004. This information is on the Bureau's web site as well.
- **National Registry Computer Adaptive Testing Planning:** The National Registry Board of Directors has voted to move toward computerized testing. Results from this type of testing are typically available to the applicant within 24 hours. The states will be working with the National Registry to implement this practice within their areas in an efficient manner. Further details are due out in the form of a Request for Proposal this summer and its not expected to be implemented until 2007.
- **TEMSIS Summary** – The sixth meeting of the TEMSIS group was held in January and the next phase for the group will include beta testing the data collection system, an educational program for the rollout of the material and a user survey to evaluate the program.

A grant has been applied for in order to move the beta testing ahead. In collaboration with the Injury Prevention Center at Dartmouth, the Injury Prevention Office in DHHS and the Enhanced EMS Project (Intersections Collaborative) this grant will fund selected communities, connections, training and evaluation. Four computers are being sought for sites most likely to include a large private EMS provider, a Fire Department based service, a small municipal EMS service and a non-transporting EMS service.

**Director Mason reported** on the dedicated funding system that supports our operation and that it is not coming in as quickly as it had last year. Also, this year the Division is covering a portion of the Emergency Management Office and the Fire Marshal's Office, and may be asked to cut 10% from the budget along with other agencies. Legislative action would be required to cut the 10% because it is a dedicated fund. Additional burden will come on July 1<sup>st</sup> when the new dormitory payments will begin.

Senate Bills:

SB 380 states that the Commissioner can implement a statewide Incident Command System. In FY 05, grant eligibility will rely on communities having a formal ICS program adhering to national standards.

SB 432 solidifies the current relationship within the Division and makes

name changes to reflect EMS inclusion in Fire Standards & Training.

A question was raised about all personnel needing to have the ICS training and the answer was that the policies and procedures need to reflect that the department uses the national management system. Suggestion was also made that EMS Providers be pushed into education themselves in the use of ICS and HazMat .

#### **Item 4 – Update on Bureau Goals/Objectives/Action Steps**

Chief Prentiss made handouts available to the group present outlining each of the Bureau's Goals and associated Objectives and the current status on each. The Supervisory Staff and Bureau Chief have worked to review the strategic plan, and updated timetables and content as needed. The "Strategic Plan Update" dated January 15, 2004 is available upon request for further information.

**Item 5. – Regional Council Update: Region III** – Dr. Mastromarino asked to have this presentation postponed until the July meeting. Postponement granted.

**Item 6 – Preparedness Update** – (handout) – B. Wood presented information regarding MCI training and it's current non-standardized status. The New England Council is currently updating its MCI program. Bill showed statistics from recent Bureau survey results that show that over 40% of EMS Units don't have formal training in MCI. Discussion ensued concerning the varying programs that are available, the misconception by hospital personnel that think Fire/EMS have this completely under control, and ways to implement this training into a regular cycle of continuing education. A sub-committee was organized to look into this further – F. Heinrich, J. Houston, D. Hogan, D. Duquette, L. Burrill & B. Wood.

**Item 7 - Goal #3** – K. Doolan gave a presentation and overview of the objectives within Goal #3 that the Field Services Section has completed or is currently working on. Brochures, presentations and posters are underway to assist EMS agencies with recruitment and retention and Instructors with educating students as to how the EMS system works in New Hampshire. The Division's newsletter name has change to "Fire & Emergency Medical Services News" and includes many articles from the EMS Staff. The web site is very active and growing, the displays have been to 7 conferences, 8 EMS Week events and 4 special events in 2003 and more requests for usage are expected.

**Item 8 – Safety of NH EMS Providers** – J. Sabato stated that Steve Achilles had given a presentation at the North Country EMS Conference and that it was received well – he will get an update from S. Achilles for the next meeting.

Dr. Sabato also reported that Sue Reeves is interested in bringing Dr. Nadine Levick to New Hampshire to give a presentation on recommendations on ambulance safety developed through a series of crash testing exercises conducted. Currently ambulances are exempt from standards and this needs to change. S. Prentiss and S. Reeves are organizing a plan to bring Dr. Levick here during EMS Week 2004 and offer presentations over the networked teleconference system statewide for the greatest exposure possible.

**Item 9. - Items of Interest** – Motion was made to move the meeting up to 1:00 PM instead of 1:30 PM because the agendas are very full and the group gets rushed toward the end of the day. Dr. Sabato made the motion and it was seconded by Dave Duquette – All approved.

Dr. Claire Wilmot will present information on the N E Council Health Care Quality at the March meeting.

J. Erickson had a concern that Infection Control Plans were not being used / followed in all EMS agencies.

#### **IV. ADJOURNMENT**

**Motion** was made by Dr. Mastromarino and seconded by D. Hogan – adjourned 4:05 PM

#### **V. NEXT MEETING**

**March 18, 2004** – 1:00 PM – Richard M. Flynn Fire Academy  
Concord, NH

**NOTE:** AT THE MARCH MEETING - The Region V EMS Council presentation will be given.

Respectfully Submitted,

Suzanne M. Prentiss, Bureau Chief, EMS

(Prepared by Kathy Doolan, Field Services Coordinator)